

# SUBPOENA BY ESSENTIAL SERVICE COMMITTEE



The following **MUST** be attached to a request for a subpoena:

- (a) motivation for the application
- and
- (b) proof that witness fees, travelling costs and subsistence expenses have been paid.

**NOTE!**

This Form together with the motivation and proof of payment of the witness fees, travelling costs and subsistence expenses must be submitted to the ESC at least fourteen (14) days prior to the date of the hearing.

## SUBPOENA IN TERMS OF THE ESSENTIAL SERVICES COMMITTEE REGULATIONS

To:

\_\_\_\_\_  
(Name of Subpoenaed Person)

\_\_\_\_\_  
(Organisation of Subpoenaed Person)

\_\_\_\_\_  
(Address of Subpoenaed Person)

A Panel has been appointed to resolve a dispute in terms of the Labour Relations Act 66 of 1995.

The matter between –

ESC Case number: \_\_\_\_\_

\_\_\_\_\_  
(Names of Parties)

\_\_\_\_\_  
(Issue of Disputes)

You are required in terms of the Regulations to appear before the Panel at

\_\_\_\_\_  
(Address where hearing is being held)

on \_\_\_\_\_ at \_\_\_\_\_  
(Date of Hearing) (Time of Hearing)

**You are subpoenaed-**

- ☐ for questioning
- ☐ to produce any book, document, visual footage or object
- ☐ to give expert evidence in terms of Section 142(1)(c)

**(Tick appropriate block)**

You must bring and produce the books, documents, visual footages or objects listed below:

\_\_\_\_\_  
(List books, documents and objects)

☐ The party requesting the subpoena has been directed to furnish you with the first day witness fees together with the reasonable travelling costs and subsistence expenses to attend the hearing.

\_\_\_\_\_  
(Signed by ESC Chairperson/Deputy Chairperson)

\_\_\_\_\_  
(Date and CCMA Stamp)

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Place)



**COMMISSION FOR CONCILIATION,  
MEDIATION & ARBITRATION**

**TO THE CCMA**

**PROTECTION OF PERSONAL INFORMATION ACT, 4 OF 2013**

By signing this referral form, I/we hereby grant my/our voluntary consent that my/our personal information may be processed, collected, used and disclosed in compliance with the Protection of Personal Information Act, 4 of 2013. I/we furthermore agree that my/our personal information may be used for the lawful and reasonable purposes in as far as the CCMA (responsible party) must use my/our information in the performance of its public legal duty. I/we understand that my/our personal information may be disclosed to a third party in as far as the CCMA must fulfil its public legal duty. I/we furthermore understand that there are instances in terms of abovementioned Act where my express consent is not necessary to permit the processing of personal information, which may be related to litigation or when the information is publicly available. Further details are available on the CCMA website.

**SIGNED AT \_\_\_\_\_ ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 202\_\_**

**INITIAL AND SURNAME: \_\_\_\_\_**

**SIGNATURE: \_\_\_\_\_**